

Form CPF M 102: Campaign Finance Report CITY CLERK OFFICE

Municipal Form

2020 JAN 21 AM II: 00

Office of Campaign and Political Finance

WOBURN, MA	File with: City or Town Clerk or Election Commission
Fill in Reporting Period dates: Beginning Date:	9/19 Ending Date: 12/31/19
Type of Report: (Check one)	•
8th day preceding preliminary 8th day preceding election	30 day after election year-end report dissolution
Michael Concannon Candidate Full Name (if applicable)	Concennon Committee
Alderman et Large, Woburn Office Sought and District	Committee Name Stanton Name of Committee Treasurer
1 Rose Farm Lane Wobern MA	Rose Farm Lane Woburn MA Committee Mailing Address
	-mail: 155 tanten O Comcost. net
SUMMARY BALANCE I	NFORMATION:
Line 1: Ending Balance from previous report	1,054.63
Line 2: Total receipts this period (page 3, line 11)	
Line 3: Subtotal (line 1 plus line 2)	1,054.63
Line 4: Total expenditures this period (page 5, line 14	475.00
Line 5: Ending Balance (line 3 minus line 4)	579.63
Line 6: Total in-kind contributions this period (page 6	5)
Line 7: Total (all) outstanding liabilities (page 7)	2,520.00
Line 8: Name of bank(s) used: Norther	n Bank a Trust
Affidavit of Committee Treasurer: It certify that I have examined this report including attached schedules and it is, to the best of my activity, including all contributions, loans, receipts, expenditures, disbursements, in kind contributions activity of all persons acting under the authority or on behalf of this computee in according to the penalties of perjury: COR CANDIDATE FILINGS ONLY: Affidavit of Candidate: (check 1 box only	butions and liabilities for this reporting period and represents the campaign dance with the requirements of M.G.L. c. 55. (Treasurer's signature) Date:
Candidate with Committee and no activity independent of the committee I certify that I have examined this report including attached schedules and it is, to the best of activity, of all persons acting under the authority or on behalf of this committee in accordance incurred any liabilities nor made any expenditures on my behalf during this reporting periods.	of my knowledge and belief, a true and complete statement of all campaign finance ace with the requirements of M.G.L. c. 55. I have not received any contributions, d.
Candidate without Committee OR Candidate with independent activity filing separate I certify that I have examined this report including attached schedules and it is, to the best of finance activity, including contributions, loans, receipts, expenditures, disbursements, in-ki campaign finance activity of all persons acting under the authority or on behalf of this committee.	of my knowledge and belief, a true and complete statement of all campaign
igned under the penalties of perjury:	(Candidate's signature) Date: 1/17/20

SCHEDULE A: RECEIPTS

M.G.L. c. 55 requires that the name and residential address be reported, in alphabetical order, for all receipts over \$50 in a calendar year. Committees must keep detailed accounts and records of all receipts, but need only itemize those receipts over \$50. In addition, the occupation and employer must be reported for all persons who contribute \$200 or more in a calendar year.

(A "Schedule A: Receipts" attachment is available to complete, print and attach to this report, if additional pages are required to report all receipts. Please include your committee name and a page number on each page.)

Name and Residential Address			Occupation & Employer		
Date Received	(alphabetical listing required) Amount		(for contributions of \$200 or more)		
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		The state of the s			
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		P*************************************	1		
	7				

ne 9: Total Receipt	ts over \$50 (or listed above)				
ne 10: Total Receip	ets \$50 and under* (not listed above)	***************************************			
	(not noted above)				
ne 11: TOTAL RE	ECEIPTS IN THE PERIOD		← Enter on page 1, line 2		
	ecaints of \$50 and under include them in line				

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE A: RECEIPTS (continued)

Date Received	Name and Residential Address (alphabetical listing required)	Amount	Occupation & Employer (for contributions of \$200 or more)
			The state of the s
	٠		
ine 9: Total Receipts	s over \$50 (or listed above)		
ine 10: Total Receipt	s \$50 and under* (not listed above)		
ine 11: TOTAL RE	CEIPTS IN THE PERIOD		← Enter on page 1, line 2
f you have itemized red	ceipts of \$50 and under, include them in line	Q Line 10 shoul	dinabada a la

^{*} If you have itemized receipts of \$50 and under, include them in line 9. Line 10 should include only those receipts not itemized above.

SCHEDULE B: EXPENDITURES

M.G.L. c. 55 requires committees to list, in alphabetical order, all expenditures over \$50 in a reporting period. Committees must keep detailed accounts and records of all expenditures, but need only itemize those over \$50. Expenditures \$50 and under may be added together, from committee records, and reported on line 13.

(A "Schedule B: Expenditures" attachment is available to complete, print and attach to this report, if additional pages are required to report all expenditures. Please include your committee name and a page number on each page.)

report all expenditures. Please include your committee name and a page number on each page.)				
Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
12/29/19	DAILY TIMES CHROMICLE	1 ARROW DRIVE WOBORN	ADVERTISING	160.00
12/11/19	FRIENDS OF WOBJEN BASKETBALL	11 BRENTWOOD AVE WOBURN	SPOMSORSHIP	100.00
11/18/19	WOBJEN HIGH SCHOOL	88 MOSTVALE AVE WOBURN	YEARBOOK AD	175.00
12/1/19	WOBJEN HIGH SCHOOL	88 MONTVALE AVE WOBURN	BULL'S EYE SPONSORSHIP	40.00
Line 12: Total Expenditures over \$50 (or listed above)				
Line 13: Total Expenditures \$50 and under* (not listed above)				
* If you have item:		ine 14: TOTAL EXPENDITU		475.00
If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized				

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

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SCHEDULE B: EXPENDITURES (continued)

Date Paid	To Whom Paid (alphabetical listing)	Address	Purpose of Expenditure	Amount
				2 2 2
				To be a second s
		ine 12: Expenditures over \$50 (or listed above)	
		ine 13: Expenditures \$50 and un		
vou have itemize	ed expenditures of \$50 and under in	nclude them in line 12. Line 13 short	NES IN THE PERIOD	

^{*} If you have itemized expenditures of \$50 and under, include them in line 12. Line 13 should include only those expenditures not itemized above.

SCHEDULE C: "IN-KIND" CONTRIBUTIONS

Please itemize contributors who have made in-kind contributions of more than \$50. In-kind contributions \$50 and under may be added together from the committee's records and included in line 6 on page 1.

Date Received	From Whom Received*	Residential Address	Description of Contribution	Value
		/		
		Line 15: In-Kind Contributions	over \$50 (or listed above)	
		Line 16: In-Kind Contributions \$	550 & under (not listed above)	
	Enter on page 1, line $6 \rightarrow$	Line 17: TOTAL IN-KIND CO	ONTRIBUTIONS	

^{*} If an in-kind contribution is received from a person who contributes more than \$50 in a calendar year, you must report the name and address of the contributor; in addition, if the contribution is \$200 or more, you must also report the contributor's occupation and employer.

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SCHEDULE D: LIABILITIES

M.G.L. c. 55 requires committees to report ALL liabilities which have been reported previously and are still outstanding, as well as those liabilities incurred during this reporting period.

Date Incurred	To Whom Due	Address	Purpose	Amount
2/27/13	CENTANON	ONERST TALK CO	CANGRES	2520
	,			
	Enter on page 1, line $7 \rightarrow \boxed{1}$	Line 18: TOTAL OUTSTAND	ING LIABILITIES (ALL)	2520-